

Virginia Opioid Abatement Authority
Timeline for Cooperative Project

Fiscal Agent: City of Roanoke
(Insert name of city or county)

Project Name: Roanoke Valley Collective Response

#	Objective	REQUIRED												Required based on number of renewal years requested to be funded (listed in the narrative section of the application 5.b)																		
		FY24												FY25				FY26				FY27				FY28						
		July	August	September	October	November	December	January	February	March	April	May	June	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4			
1	Support individualized and collective needs of regional localities	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
2	Convening, planning, and advising on best practices	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
3	Matching service providers with localities and collaborative org	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
4	Expanding geographically to serve all localities in RVARC ser	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
5	Provide technical assistance on prioritizing needs	x	x	x	x												x	x	x		x	x	x		x	x	x		x	x	x	
6																																
7	Increase visibility of RVCR to foster increased participation and	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
8																																
9	Improve visibility and compatibility among data systems across	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
10																																
11	Increase number of participants enrolled in regional abatement	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
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